

AN

Inaugural Dissertation  
on the Pneumonia Biliosa of Virginia,  
and on the use of Emetics & Theri-  
acical preparations in the treatment  
of that disease. —

by  
Geo. A. C. Bernhard.

of Virginia. —

"The horizon of Research is limitless;  
& the discoveries of Truth are infinite."  
P. L. L. L.

Printed March 10<sup>th</sup> 1826

1847  
The first of the year was a  
very dry one, and the  
crops were much injured  
by the drought. The  
winter was also very dry,  
and the ground was hard  
and frozen for a long  
time.

The spring was also very dry,  
and the crops were much injured  
by the drought.

The summer was also very dry,  
and the crops were much injured  
by the drought.

The autumn was also very dry,  
and the crops were much injured  
by the drought. The  
winter was also very dry,  
and the ground was hard  
and frozen for a long  
time.

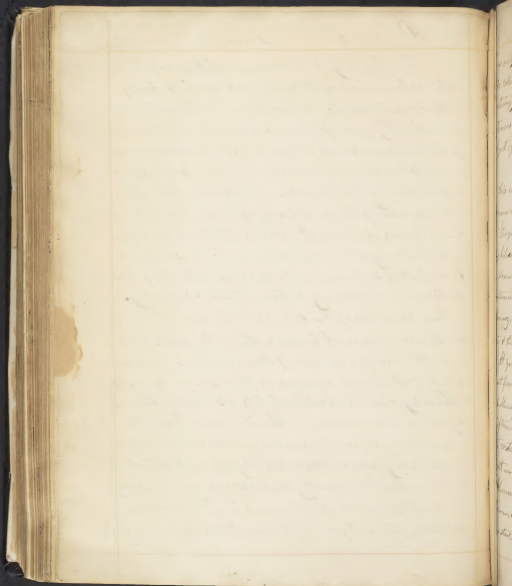
1848  
The first of the year was a  
very dry one, and the  
crops were much injured  
by the drought. The  
winter was also very dry,  
and the ground was hard  
and frozen for a long  
time.

1849  
The first of the year was a  
very dry one, and the  
crops were much injured  
by the drought. The  
winter was also very dry,  
and the ground was hard  
and frozen for a long  
time.

## *Pneumonia Biliosa.*

The history of Medicine alike refutes the idle calumnies of its enemies & excites a holy enthusiasm in its votaries. — Within the short space of thirty years, physicians have discarded the dogmas of the European schools, & have adopted a bold and original practice, founded on rational principles & confirmed by the touchstones of experience. — Science, which destroys the fictions of opinion & maintains the decisions of Nature, "proves that a knowledge of the healing art is not confined to the privileged few, but is extended to all zealous cultivators of Medicine, according to their talents & industry."

The divisions of the sciences into several branches, the laudable ruin of fairs, & the noble wish to relieve the distresses of our fellow creatures, have called forth all the energies of the human mind & thereby elicited facts not less splendid than useful in their results. — Such have been the improvements in the practice of Medicine, that almost every disease described by the celebrated Dr Cullen has been greatly elucidated & explained by the most eminent physicians. — *Pneumonia Biliosa* the subject of the present essay, however, has



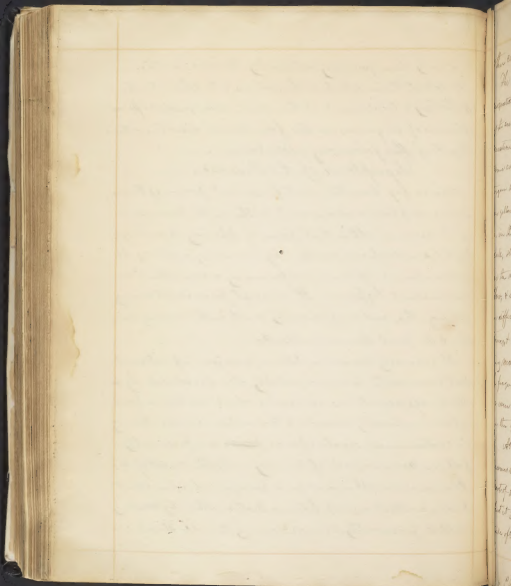
has only been partially noticed by Medical writers. —

To collect those detached observations & to delineate the pathology & treatment of the most distinguished practitioners of Virginia, in this formidable disease, is the object of the following dissertation. —

### Symptoms of the Disease.

This is by far the most frequent form of Pneumonic inflammation, met with in the lower parts of Virginia. — It is that form of Phuris, characterized by bilious discharges, either by vomiting or stool; it is sometimes epidemic, assuming a remittent or intermittent type. — It is most prevalent during spring, tho, not unfrequently met with during winter & the first Summer Months.

It generally commences like a paroxysm of intermittent fever, with languor, ability, &c. succeeded by a chilliness (sometimes an ague) which continues from fifteen or twenty minutes to two or three hours: during its continuance erratic pains ~~pains~~ are frequently felt in various parts of the body. With most of the phenomena attendant on a paroxysm of intermittent fever, a discharge of bilious matter, either by vomiting or stool frequently occurs during the cold stage; in  
other



Other cases not until the exacerbations of the fever —

The cold stage is succeeded by a febrile exacerbation, designated by quick & difficult breathing, & increased heat of the surface; the patient also complains of a burning sensation in the epigastric region, violent headache, and in some cases delirium — As the disease advances the tongue becomes covered with a brown or black fur; the eyes are yellow & the skin is often of a bronze colour; the pulse is, in the inflammatory form of this disease, frequently full, strong, hard, & quick, but in some cases, particularly in the advanced stages of the disease the pulse is weak, slow, & soft, & at the same time very variable; not only in different persons, but in <sup>the</sup> same persons at different times, & in different arms, that on the side affected being most obscure — Dr. Clapham observes, that he frequently found it like that of a man in health, or even slower than natural, when the patient was in the greatest danger. —

At the commencement of the hot stage respiration becomes more difficult, & pain is frequently felt in some part of the thorax; its seat varies in different subjects, but it is generally located in one side, & in the right side oftener than in the left. The pain is felt some times

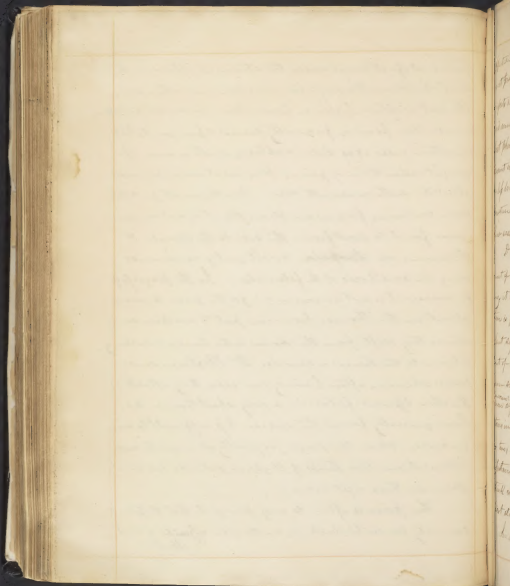
Dr. Clapham on the diseases of *Pinnaea*.



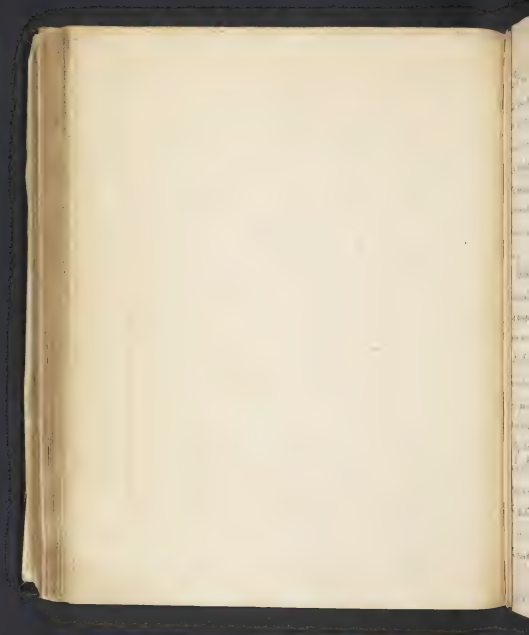


times, as if it were under the sternum, often in the back between the scapulae; and when in either side, its seat is often higher or lower, more forwards or backwards. The pain is frequently severe & pungent, but in other cases it is dull & obtuse, with a sense of weight rather than of pain; it is most severe when seated about the sixth or seventh ribs. For the most part the pain continues fixed in one place, tho, it is not uncommon for it to dart from the side to the clavicle & sternum, or scapulae, or obliquely downwards along the cartilages of the false ribs. — In the progress of the disease it is not uncommon for the pains to rove about in the Thorax from one part to another, sometimes they shift from the Thorax to the loins, & suddenly return to the Thorax or bowels. Dr. Claghorn saw cases, wherein, after leaving one side, they attacked the other & proved fatal in a very short time. We have generally found the disease less difficult to cure, in cases, where the pains frequently changed its seat. More than two thirds of Claghorn's patients had their pain in their right side.

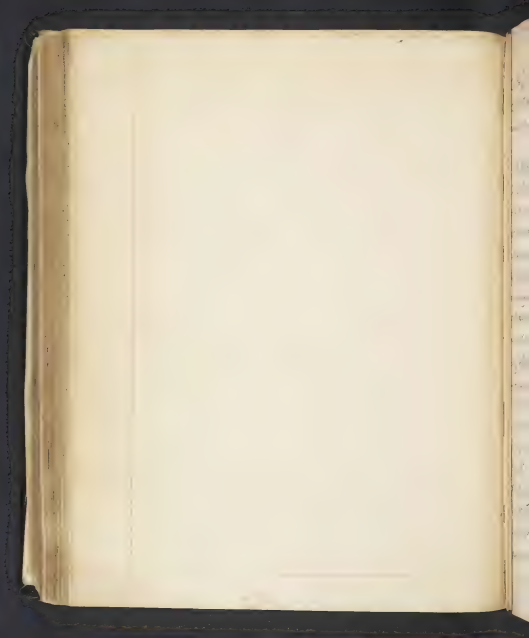
The pain is often so very pungent, that the patient can only lie on his back, or on the side opposite to that affected.



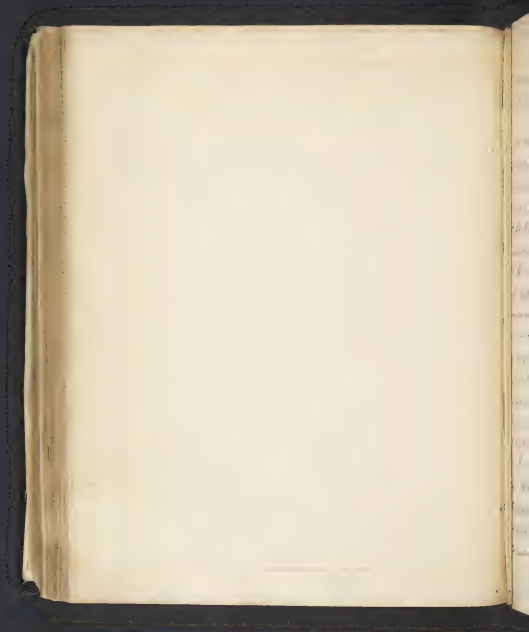
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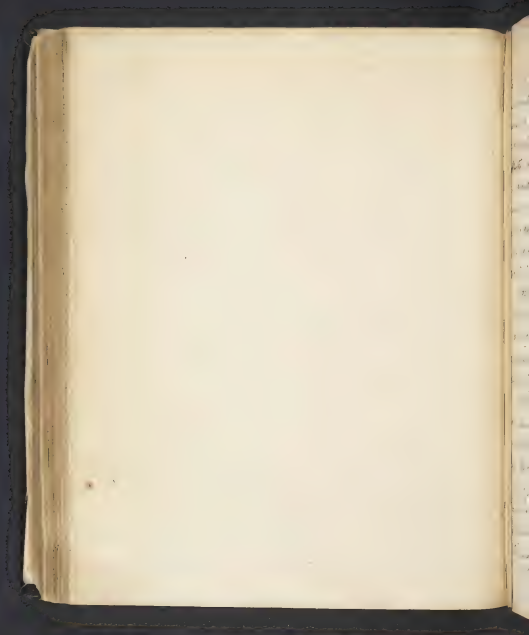




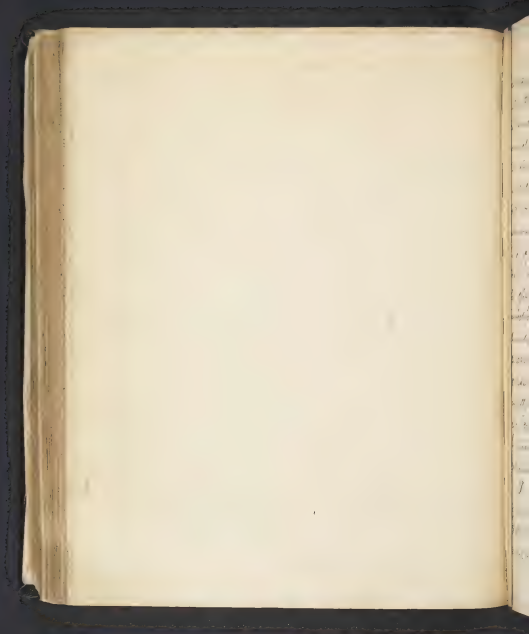




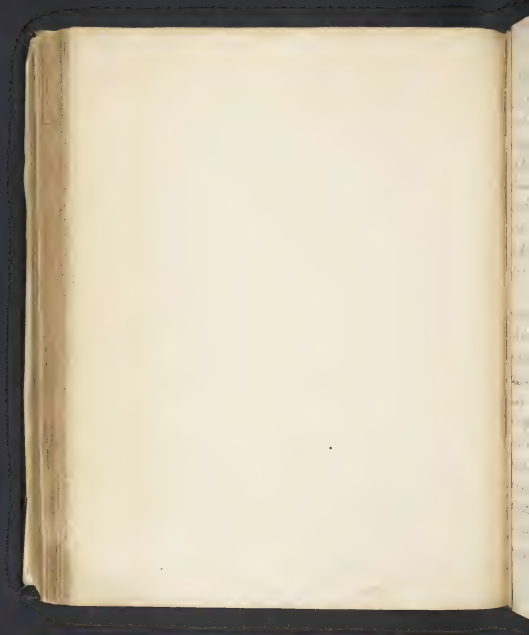
The first thing I noticed when I stepped  
 onto the beach was the soft sand under my feet.  
 The gentle waves lapped at the shore,  
 creating a soothing rhythm. I walked along  
 the water's edge, feeling the coolness of the sea.  
 The sun was low in the sky, casting a golden glow  
 over everything. It felt like time had slowed down.  
 I took a deep breath, inhaling the salty air.  
 This was exactly what I needed.





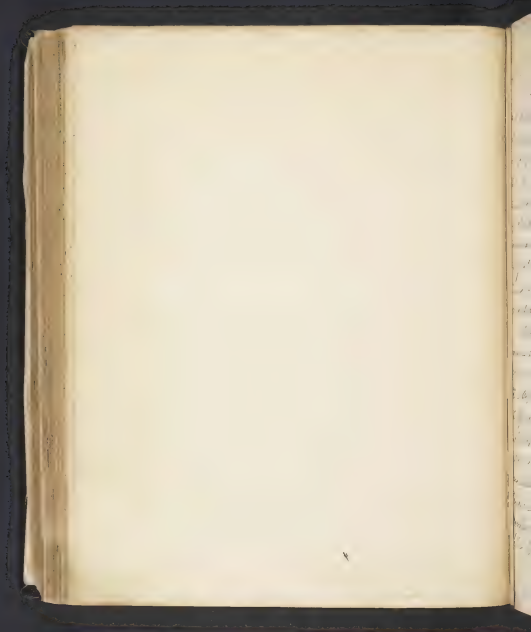






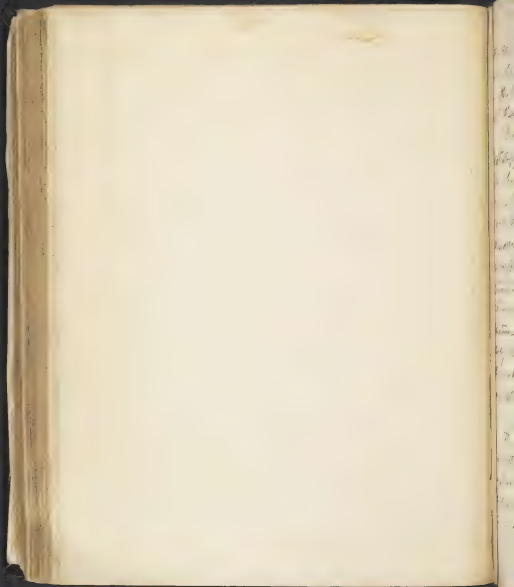
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The following is a list of the  
 names of the persons who have  
 been appointed to the various  
 positions in the office of the  
 Secretary of the Treasury  
 for the year 1864.

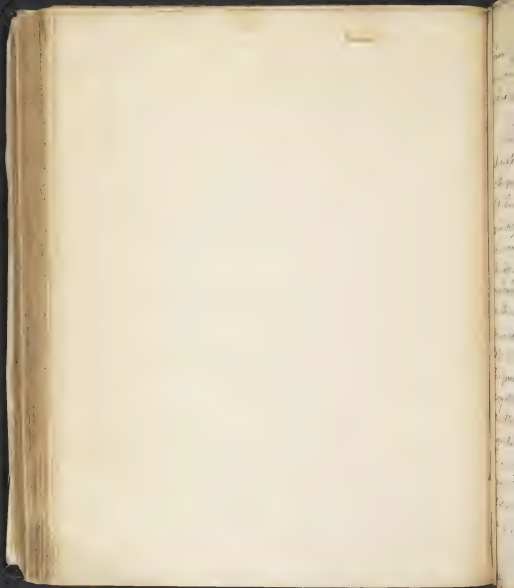










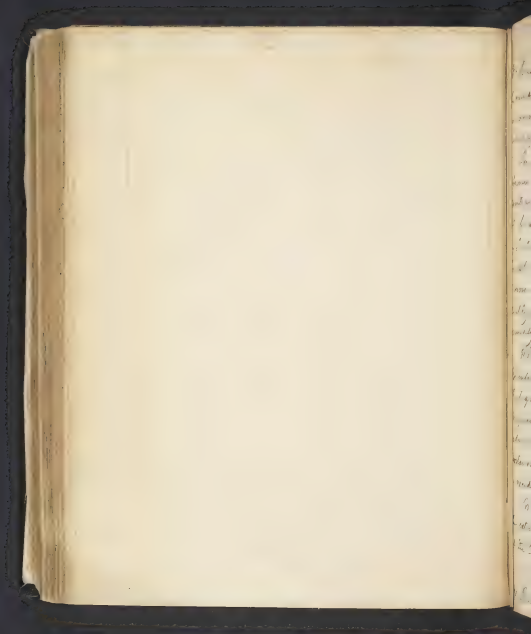


have these conditions, instead, the hemorrhage  
 only, which is the only point of difference  
 (Hemorrhage is the first indication in Leucorrhoea)  
 1st. 1st Edition.

It is a matter of opinion, even, in regard  
 to respecting the proper time for evacuating blood,  
 & the quantity to be evacuated. Sydenham - directed  
 his patients to loose 40 ℥s or the maximum  
 quantity - Pluvier, the absurdity of this restriction  
 is sufficiently obvious to every practitioner.  
 The loss of 40 ℥s of blood will have a greater effect on  
 our constitution, than the loss of 60 ℥s or even 100 ℥s  
 another. Dr. Rochoux advises, "the blood must be  
 drawn abate, as the patient begins to breathe, from  
 XVI to XXIV ℥s are generally necessary to effect  
 this point. If "Says he" I was called on the first  
 day of the disease, I bled as above & repeated it in  
 the afternoon, the patient died in the evening; with  
 regard, the urine, expectorations, & the appearance  
 of the blood; the 2d. was repeated the next  
 morning if there was the least room to suspect  
 that any obstructions remained in the system, blood  
 40 ℥s or rather 60 ℥s in the first 24 hours.

J. Rush

1800



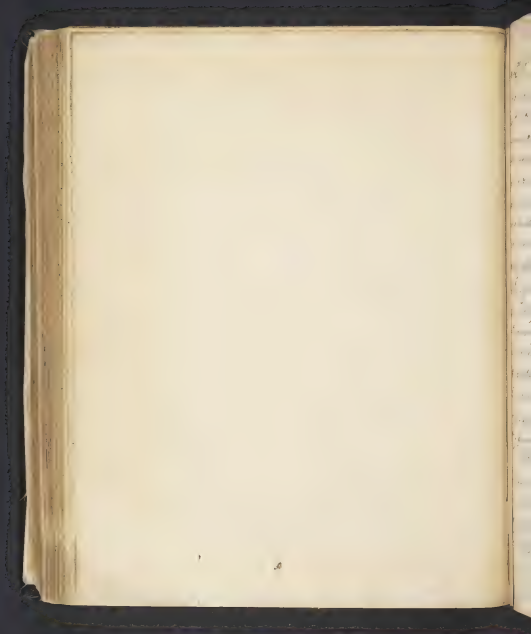
100 Dr Rush, observes copious Hæm. "It should be said,"  
be carried to a greater extent than even in Pleurisy-  
monia; rather; there being two actions to subdue  
the disease.

§ The author is in doubt as to the propriety  
observing, "If a person just before he is laid in the  
hands of violent exercises debauched, or persons  
old, he seized with a great shivering, succeeded  
by a strong sense of oppression, or load in the  
chest, with difficult, & short respiration  
& more or less cough, blood is to be drawn imme-  
diately, from a large orifice, & in considerable  
quantity."

§ Hippocrates & Sydenham bleed their  
patients from the more of the affected side; whereas in  
Portugal an Edict was issued prohibiting every  
Physician from letting blood from the affected  
side in Pleurisy. We consider the latter im-  
portance on which side it is performed, provided  
a decided impression be made on the system.

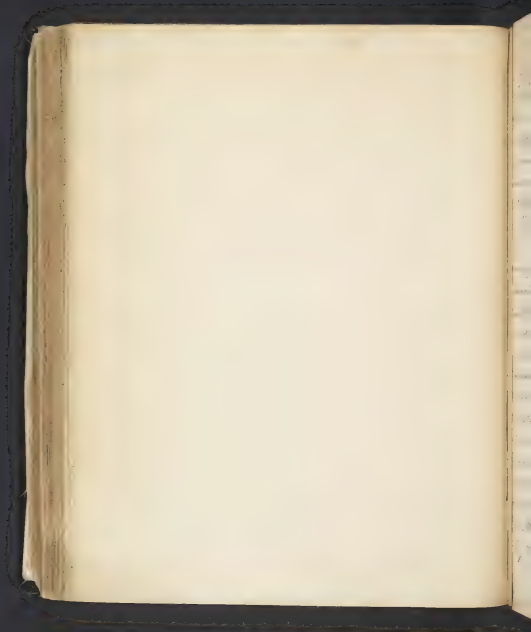
Now, it is necessary that list of authorities sent  
be extended to a considerable length; but as the use  
of this cannot be so great, but is repeated to be very  
soon

111 Rush's Med. Lectures, § Dr Geo Heath

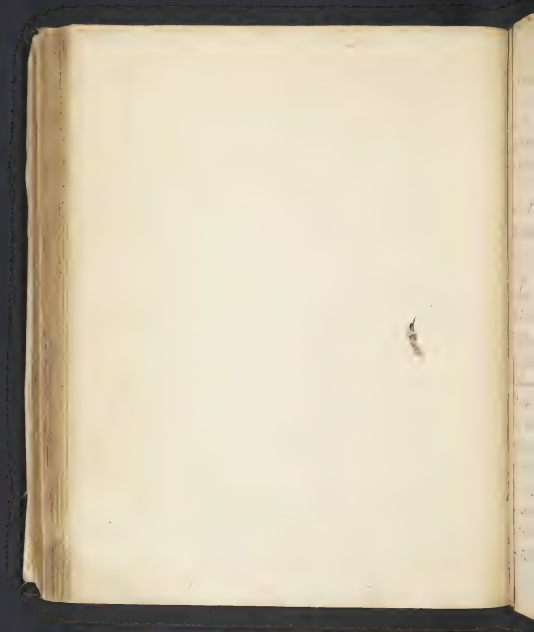






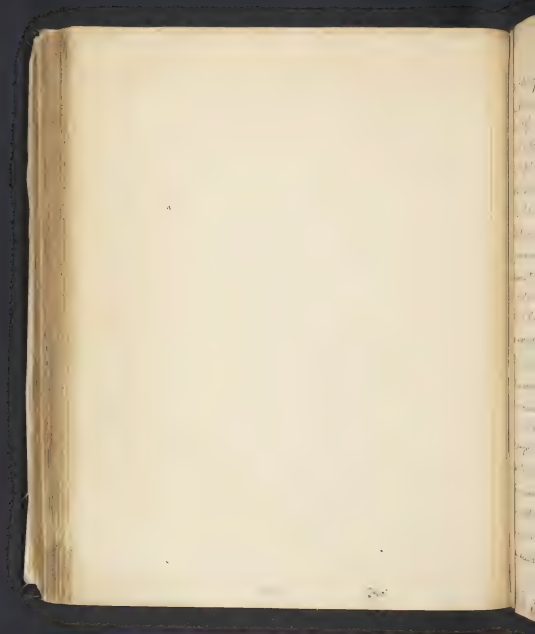


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H.S. ...  
...  
...  
the blood ...

It also tells me that you have been  
down to the bottom of the lake, and  
exploring the bottom of the lake, and  
finding out what is at the bottom of the lake.  
I am glad to hear that you are  
well, and hope you are soon  
back to the top of the lake.  
I am glad to hear that you are  
well, and hope you are soon  
back to the top of the lake.

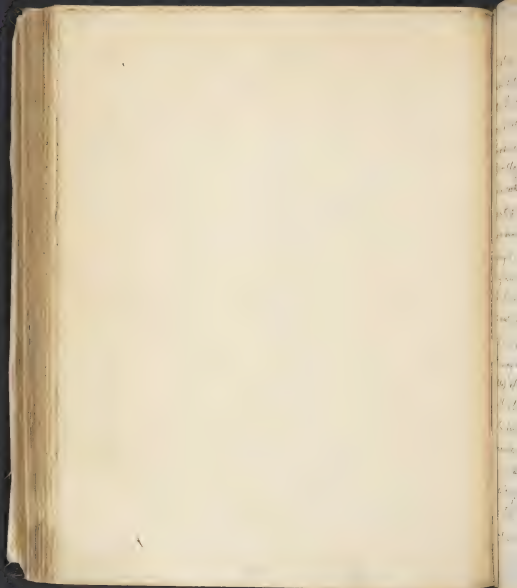


meeting to be held in the morning  
 on June 1st 1841. The  
 kind of cases were in general similar to those  
 which we have seen in Theo. Pillsbury's case.  
 The patient was placed in a bed and  
 was in a state of collapse.

But in the morning of the 2nd day, at 11 o'clock  
 Dr. J. W. B. took the patient into his study  
 and examined him. He found the patient in a  
 general collapse, with a pulse of 20, and a  
 countenance which was almost insupportable.  
 He then gave him a small dose of the  
 following medicine: he has no case  
 like the Anchor, I hope; on the other, it may  
 precipitate death. It is indeed a case  
 where we must be careful not to give large  
 doses of any kind, as it is a matter of life and  
 death. (Caution.)

As inflammatory diseases require the use  
 of purgatives, is a fact universally admitted. Dr. Keppel  
 calls attention to this fact, and states that  
 it is a mistake to suppose that they are indicated but  
 cannot be used to the same extent as in other  
 inflammatory diseases. In this particular form of disease  
 we see no objection to the free use of cathartics, at  
 least

"N. B. 1841"

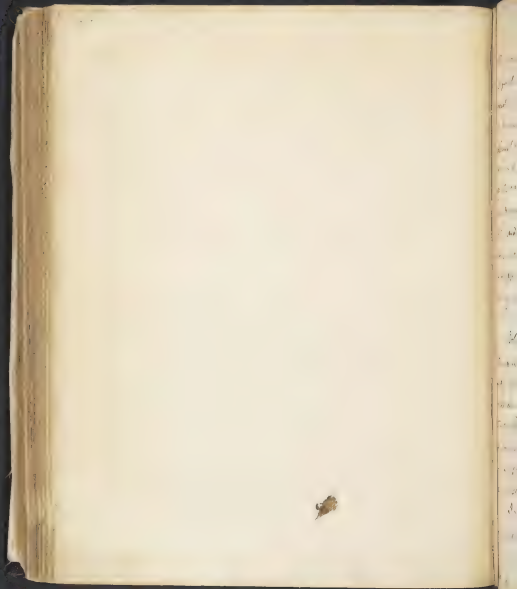




East in the commencement. Dr. Chapman then  
 shows by his authority could not be given, observes,  
 that in general purgatives necessary in the winter of this  
 season which he proceeds to in the Northern States not  
 long since. Particularly among the 20 miles off the  
 West Coast from the Southern States in the  
 it took strongly of a bilious & catarrh. not mean-  
 ing to keep out evacuations from the bowels. In con-  
 sideration of the necessity of this practice, I strongly  
 copy to mention the names of Symplicium, & some  
 rhubarb, Marsh & Hamilton.

Dr. Marsh shows "we should use daily purgatives with  
 the violence of the ancient cathartics; & observe also to case  
 while a part of the purgative used in this disease.  
 Pomegranate combined with black salt, Spemanha  
 Jalap etc. and assist in its operation by the use of  
 oil, oil of Rhenish, white port & morphia etc etc.  
 The same purgatives are recommended by some  
 Hamilton.

Dr. Richard Field & Theo. F. Collins  
 of Virginia, gentlemen eminent for the knowledge  
 of their pathological views & we occupied ourselves con-  
 sidered Colours the same as were in the extent  
 of this.

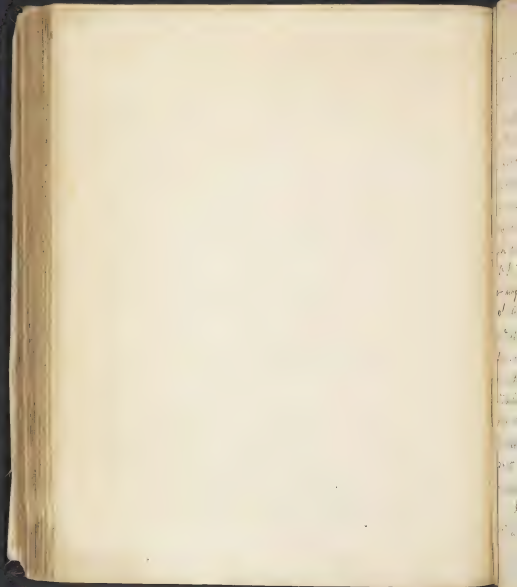


the same disease they use it freely while the tumor  
is small, the eyes yellow, or much inflamed - action  
ceases. This has been the course of practice followed  
by them for a number of years. We consider this an  
almost unparallated success in the treatment of this  
form of the disease, & which is evidenced by the success  
of the course of practice pursued by them. There is  
indeed a case of pneumonia which should strongly be  
attended to, in their administration, never to allow  
their action the inclination to be such as to encourage  
a suppuration of the spot, or rather result in the  
many instances destroy the patient.

### Respirators.

Blistering the subcutaneous parts of the body in  
rheumatism & inflammatory diseases, is an ancient remedy,  
yet considerable diversity of opinion exists  
respecting the time of application. It was long  
the custom of Physicians & in fact to get the patient  
of course to apply a blistering plaster to the point but  
as late as 1760 it was as near the end as possible in the  
early stage of the inflammatory diseases of the thorax.

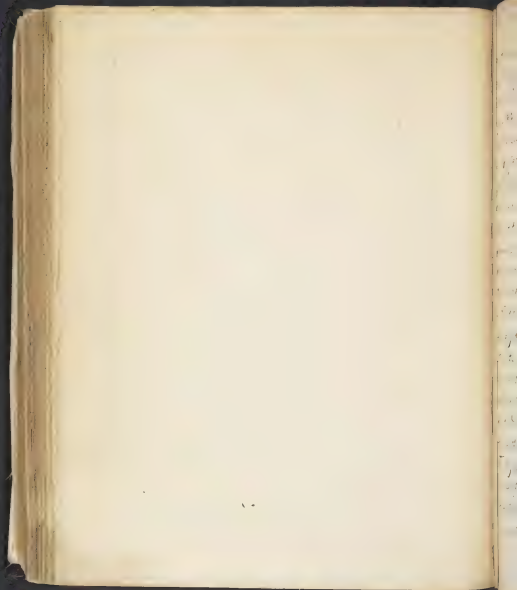
Dr. John Keightley & others "The reading of  
the history of the Hospital, I found no inconvenience  
from



from using the blister immediately after the first bleed-  
ing, but, on the contrary, a more sudden & certain  
relief; May frequently when the disease was not  
advanced I have laid plaster put directly to the side  
and the patient bed afterwards, being satisfied if the  
skin was opened before the flies had time to fasten  
clear. Dr. Pringle made up every blistering  
was given in at once & followed by many violent  
Erysipelas; he thinks it slightly & reprehensible and  
have authority equally good on our sides.

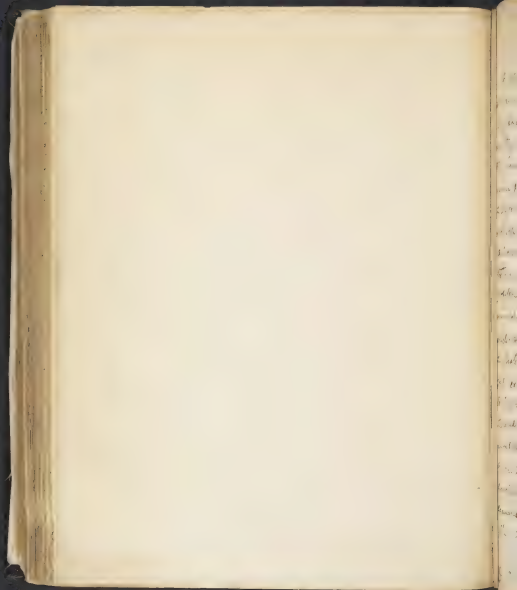
Dr. Pringle practised in an army hospital, where  
we may reasonably suppose the patients were greatly  
debilitated, by long exposure, want of shelter  
&c. &c. In this case the early application of  
blister was by appointment as there in the country,  
where the people are in the most part in an oppor-  
tune situation. we are disposed to think that the  
proper time for applying a blister is when a state  
of direct acidity has been induced, by eripious &c.  
&c. & not a continuation; the more especially in the  
eripious disease.

In this disease we should endeavour to  
relieve the inflammation & dyspepsia first, which  
is the first



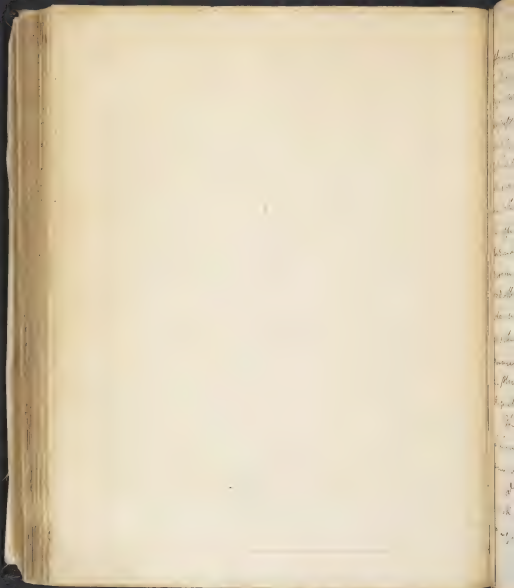
statement, subsequently, in writing, order, & also  
 the first order, & made the same at all of these  
 orders. It is further true & necessary to state  
 from this document, that the first order was  
 made on the 1st day of the month of May in  
 1862, & was made by the officers of the  
 1st Regt. of the 1st Div. of the 1st Army  
 Corps, & by it the very same thing was  
 done as was done in the first order.

some at least that were in the early period of the  
 abolition may be supposed to have not only great  
 views upon the great bleeding sinners of the  
 nation. There are for the most part the students  
 of abstract theories in persons who are in a great  
 measure deluged by business. One knows that  
 it is the practice in Virginia as a general rule  
 to apply a historical plaster in these cases  
 which will not do much harm in the present  
 second to the first effect but tending to be a  
 one - the action of the slave people, which might  
 truly prove a blessing in some organic offices  
 of the things. Disappears in the minds of the nation  
 and it is not the next state, they are frequently some  
 action.







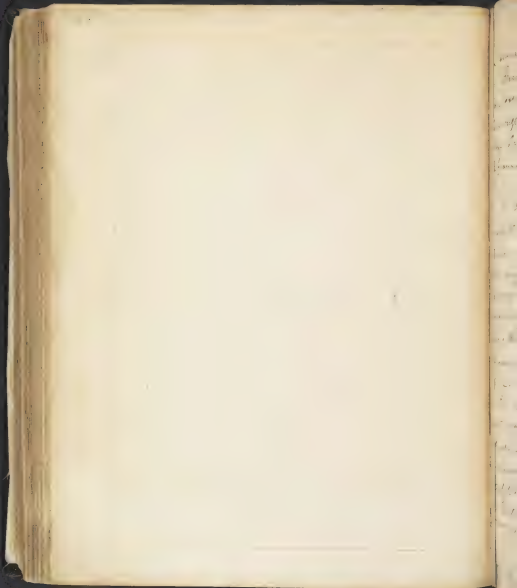


Observes. I have several times given a  
Emetic in Peripneumonies with great advan-  
tage, when the expectoration has been suddenly  
checked, & the difficulty of breathing greatly in-  
creased; but it was when a proper quantity of  
blood had been around antiseptic, and the violence  
of the fever abated: but in such cases very little  
should be sought after it to promote vomiting.

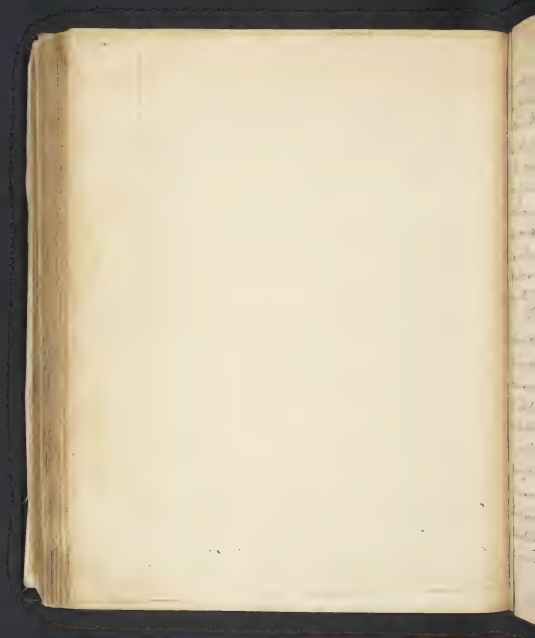
The efficacy of oxymel scitillaceum in relieving  
asthmatic disorders is notorious. The mighty  
cure in Pleurisies etc, boasted of by Melanderus  
and others, with the Antimonial Ipecacuanha  
etc, is, even greatly owing to its emetic quality.  
And the famous Poudre des crachats, or  
Poudre Minérale, gained such high reputa-  
tion in Pleurisies etc, in a great measure from  
the gentle efforts it excites to vomit.

The best Antimonial preparation, which  
I have ever tried, is the *Minerale Curieuse*  
min, or glass of Antimony in wines."

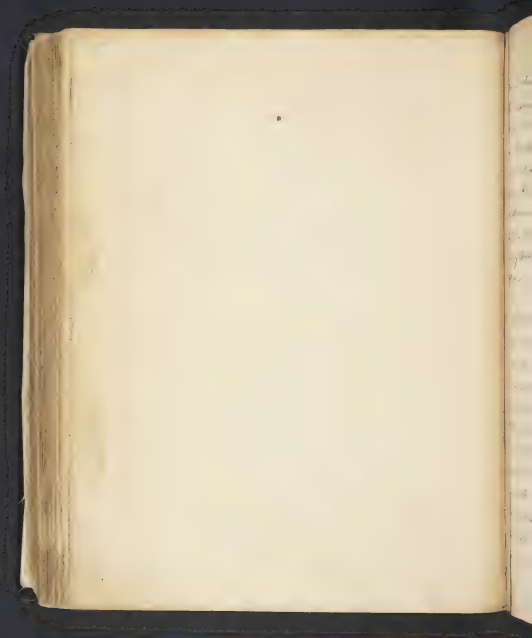
Dr Huxham asserts, "That patients are  
much more relieved, by the application of per-  
suing, much better than by the fire, purging,





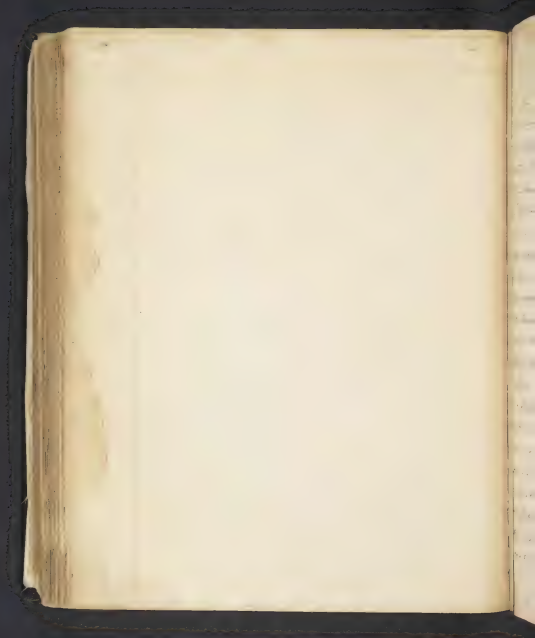






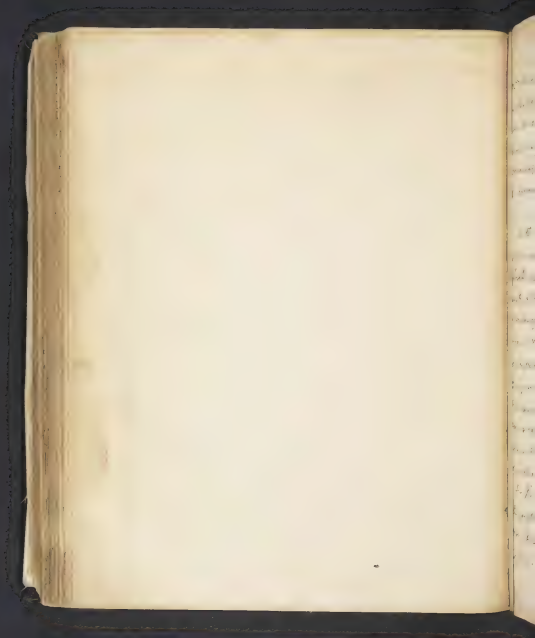






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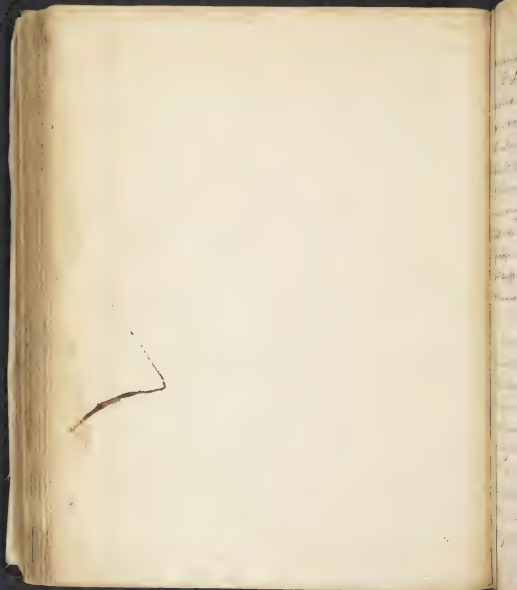
Supposing of course I am some patients as it were -  
 attached to you - I am sure of suggestions by this rela-  
 ble physician. \* I suppose also you are somewhat  
 - nervous as to getting down to business, and with great  
 advantages, & showing the way of it. I am sure you  
 are advancing things in a noble & philosophical

### Simultaneous

With regard to Simultaneous, much correspondence  
 of opinion has heretofore existed, & still exists. Baron  
 Stock observes "I. cases where the patient is soft &  
 weak, & there is not a great disposition, on account  
 of weakness, in receiving of Sigmund's method, such  
 to be very, beneficial". In some cases, however -  
 is indispensable, it should be given at night, & given  
 to the patient in a comfortable, & in a pleasant way  
 & in a comfortable position; & the patient is not to be  
 & the patient is not to be disturbed, as to the manner of  
 administration, & the manner of giving it, & the manner of  
 giving it, & the manner of giving it, & the manner of giving it.

In French recommendations, the public houses  
 the usage of wine, & the usage of wine, & the usage of wine,  
 & the usage of wine, & the usage of wine, & the usage of wine,  
 & the usage of wine, & the usage of wine, & the usage of wine,

5. The above is a very good  
 receipt

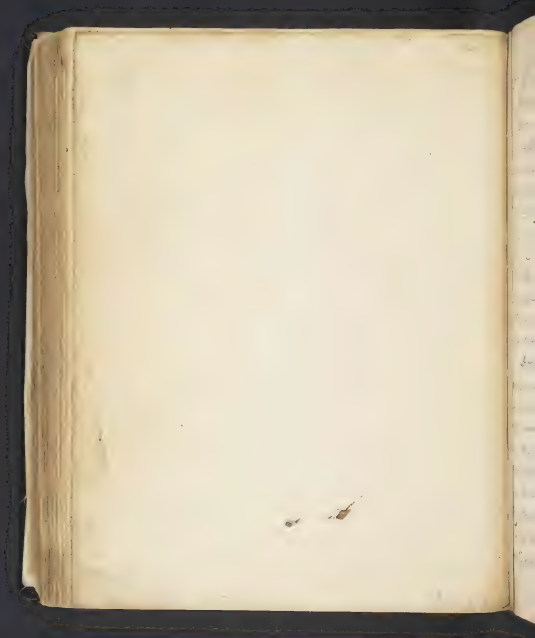


necessary in cases of emergency.

Dr Jos S. Stillman of Philadelphia, 1820-1825  
practised 30 years with almost unparalleled success  
upon decided phlegmasia of the test. It is con-  
stantly, but also occurs in other cases of deep  
-seated & polygenic inflammation. He prohibited the use  
of opium in his annual dissection, & in all his  
in many cases. He was under the impression  
that all of these cases may be cured with ad-  
vantage in some cases, but more often  
not sufficient to lay down any rules for their  
administration.

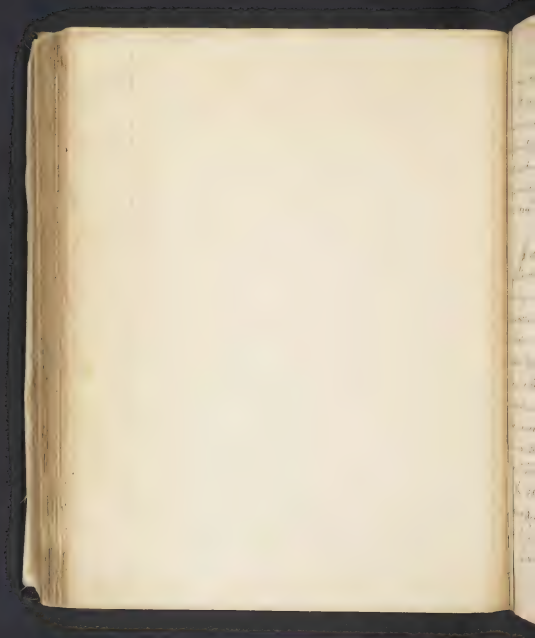
Stillman's

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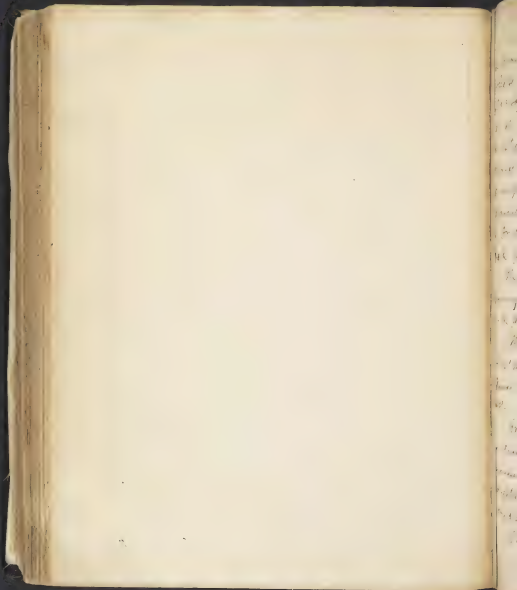
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... .. as soon  
with the ... ..  
... .. of the ... ..  
patient ... .. It is ... ..  
to ... .. It is  
... ..  
the ... ..  
... ..

... .. the above ... ..  
... .. to be strictly observed ... ..  
... .. in the ... ..  
... .. the ... ..  
... .. more ... ..  
... .. heating ... ..  
... .. on the ... ..  
... .. a ... ..  
... .. long ... ..  
... .. of the patient is ... ..  
... .. it is to be ... ..  
... .. with the ... ..  
The ... ..  
... .. is in no case more applicable than  
in ... ..

... .. 4 ... ..  
... ..



importance during the treatment of this disease. Flax seed tea, barley water, toast water, acidulated & saponaceous liquids, plain water etc, are all used occasionally in Virginia, with the best effect. The inhalations of stimulating vapours in the secondary stage of the disease, when the lungs are oppressed & respirations rendered difficult thereby, has been highly recommended by Drs Chapman, by Van Swieten, Huxham, Black, Pringle, Rush & others.

The cleanliness of the patient is an object of primary importance & should never be neglected by the practitioner.

The diet should be of the most digestible & least stimulating kind, as Rice, Tapioca, Sage, Potatoes etc. Meats of every kind are inadvisable.

Exercise of every kind must be prohibited as it acts as a very powerful stimulus, & thereby increases inflammatory action. Conversation & light, are also stimulants which should be avoided.

Delirium is a very alarming symptom  
it.



it is often the effect of the very great sympathy between the brain & stomach; it is to be treated by a blister to the Epigastrium, or on the back part of the neck, or between the shoulders, & the strict adherence to the antiphlogistic regimen.

After general B.S. has been carried as far as the state of the system will justify: more blood may be drawn by cups & leeches, they relieve pain etc, not so much by the loss of blood from the general system as by relieving the distended capillaries of the pained part. dry cupping is also of great service, when no more blood can be drawn from the patient with safety.

Geo. A. C. Barham.

